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Governor



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Director

ARIZONA DEPARTMENT OF WATER RESOURCES

3550 North Central Avenue, Second Floor
PHOENIX, ARIZONA 85012-2105
(602) 771-8500

Application for an Assignment of a Type B Certificate of Assured Water Supply

This application

This application is to assign a previously issued Type B Certificate of Assured Water Supply (Type B Certificate) or to assign a Certificate that was issued prior to September 12, 2006 (unclassified Certificate). The holder of a Type B or unclassified Certificate and the assignee may apply for approval of an assignment of the Type B Certificate if the application meets the criteria of A.R.S. § 45-579(A). A Certificate holder is any person included on a Certificate except any person who no longer owns any of the land included in the Certificate or any potential purchaser whose purchase contract has terminated or expired. If none of the former Certificate holders own any of the land included in the Certificate, the assignee(s) may file the application. For more information regarding this application, please see A.A.C. R12-15-706.

An assignment may be for the entire area included in the previously issued Type B or unclassified Certificate (full assignment) or for a subset of the area included in the previously issued Type B or unclassified Certificate (partial assignment). The Department will conduct a material plat change review under A.A.C. R.12-15-708 to determine if any changes made to the plat since the issuance of the original Certificate are material.

You may also use this form to classify the assigned Certificate(s) as (a) Type A Certificate(s) if you submit evidence that meets the criteria of A.A.C. R12-15-704(H)(1).

The Department strongly encourages a pre-application meeting if you have not previously been through the assignment application process. Please contact the Office of Assured and Adequate Water Supply to schedule a pre-application meeting.

Please submit two copies of all application materials. If there is not enough room provided on this form for answers to any questions, please attach separate sheets as necessary.

Technical Registration Requirements

The Arizona Department of Water Resources requires hydrologic and engineering reports, studies, drawings and maps, specifications, analyses or related data submitted to support the evaluation of this application to be signed and sealed by a professional geologist or qualified professional engineer who is registered in the State of Arizona under the authority of A.R.S. Title 32, Chapter 1. For additional details regarding this requirement please refer to "Notification of Professional Registration Requirements for Persons Submitting Hydrologic Reports and Related Data to the Arizona Department of Water Resources to Support Applications for Permits or Approvals". This notice is on the Department's website in the category "Permits, Forms and Applications" and can be found under the heading "Professional registration requirements for persons filing hydrogeologic and engineering studies".

Time Frames for Review of Your Application

Within two hundred and ten (210) days after receipt of your application, the Department will determine whether your application should be granted or denied, unless this time frame is extended as described below. In processing your application, the Department will first determine whether the application is administratively complete (administrative completeness review), and then whether the application meets the substantive criteria established by statute or rule (substantive review). Each of these reviews will be completed within the times stated below. The time for the administrative completeness review plus the time for the substantive review is referred to the overall time frame.

1) Administrative Completeness Review Time Frame

Within one hundred and fifty (150) days after receipt of your application, the Department will determine whether your application is complete. After your application is complete, the Department will proceed with substantive review.

If the Department determines that your application is incomplete, the Department will provide a written notice, including a comprehensive list of specific deficiencies. Until the missing information is received, both the administrative completeness review and the overall time frames will be suspended. When the Department receives the missing information, the administrative completeness review and overall time frames will resume. Your application will not be complete until all of the requested information is received. If you do not supply the missing information within sixty (60) days of receiving the written notice, your application may be denied.

2) Substantive Review Time Frame

Within sixty (60) days after the Department determines that the application is complete, the Department will review your application to determine whether it meets the substantive criteria required by statute or rule. By mutual written agreement between you and the Department, the time for substantive review may be extended by up to 52 days, which is twenty five (25) percent of the overall time frame as provided in A.R.S. § 41-1075 (B).

During the substantive review, the Department may make one written request for additional information. You may also agree in writing to allow the Department to submit supplemental requests for additional information. If additional information is requested by the Department, both the substantive review and overall time frames will be suspended. When the additional information is received, the substantive review and overall time frames will resume.

At the end of the Department's substantive review, the Department will send you a written notice either granting or denying your application. If your application is denied, the notice will include the justification for the denial and an explanation of your right to appeal the denial.

If you have any questions or require additional information, please contact:

Office of Assured & Adequate Water Supply
3550 North Central Avenue, 2nd Floor, Phoenix, Arizona 85012
Telephone number: 602-771-8599
Fax number: 602-771-8689.
Email address: assuredadequate@azwater.gov

ARIZONA DEPARTMENT OF WATER RESOURCES
OFFICE OF ASSURED AND ADEQUATE WATER SUPPLY
3550 NORTH CENTRAL AVENUE, 2nd FLOOR
PHOENIX, ARIZONA 85012
(602) 771-8599 Fax: (602) 771-8689
assuredadequate@azwater.gov

DATE
RECEIVED:

NOTIFICATION OF AN APPLICATION FOR ASSIGNMENT OF A CERTIFICATE OF ASSURED WATER SUPPLY

This notice is to be completed by applicant. Please type or write information legibly. This form is to be used directly for the required posting on the Department's website. If information contained in this form is illegible, the application will be rejected. All information contained herein is provided by the applicant and has not been reviewed by the Department for accuracy.

Pursuant to Arizona Revised Statutes, Section 45-579, Subsection E, notice is hereby given that:

(List all names as they appear on the current Certificate)

Has/have applied to the Department of Water Resources to assign the Certificate of Assured Water Supply for:

(List the SUBDIVISION NAME as it appears on the current Certificate)

located within: TOWNSHIP _____, RANGE _____, SECTION(S) _____

TOWNSHIP _____, RANGE _____, SECTION(S) _____
(GSRB&M)

COUNTY, _____ AMA _____

to:

Name(s) of Assignee: _____

The source of supply will be (water type(s)) _____

To be provided by (water provider(s) or dry lot) _____

(This section to be completed by Department)

FILE NUMBER (DWR No. _____ - _____)

Comments on an Application for the Assignment of a Certificate

Any person may submit a comment regarding the above referenced application to the Department of Water Resources by phone at (a toll-free number outside of the Phoenix metropolitan area) 1-800-352-8488, or by e-mail at assignmentcomment@azwater.gov, or by U.S. mail or hand-delivery to 3550 North Central Ave., 4th Floor, Phoenix, AZ 85012 on or before _____
(14 days after notice is posted).

ARIZONA DEPARTMENT OF WATER RESOURCES OFFICE OF ASSURED AND ADEQUATE WATER SUPPLY 3550 NORTH CENTRAL AVENUE, 2nd FLOOR PHOENIX, ARIZONA 85012 (602) 771-8599 Fax: (602) 771-8689	DATE RECEIVED:
APPLICATION NO:	

**Application for an Assignment of a Type B Certificate of Assured Water Supply
or a Certificate of Assured Water Supply Issued Prior to September 12, 2006:**

1. Subdivision information:

- a. Name of subdivision as given on the current Certificate: _____
- b. Current name of subdivision, if it has changed: _____
- c. Names listed on current Certificate: _____
(Attach additional sheets if necessary to list all owners listed on the current Certificate.)
- d. Date current Certificate was issued: _____
- e. If the current Certificate was not the original Certificate issued for this subdivision, list the date the original Certificate was issued: _____
- f. Number of lots on current Certificate: _____
- g. Current Certificate Number: _____
- h. Number of lots from current Certificate to assign: _____
- i. Number of lots from current Certificate that will be retained by current Certificate holder(s): _____

NOTE: If all the lots on the current Certificate are not being assigned, this application is for a partial assignment.

- j. Location of the subdivision: Township _____ Range _____ Section(s) _____
If there is more than one township and range, please list them on a separate page and reference as an attachment. See attachment _____
City: _____ County: _____ AMA: _____

NOTE: If none of the parties on the current Certificate own any part of the subdivision, the current owner may assign the current Certificate to themselves. Contact the Office of Assured and Adequate Water Supply for further assistance.

2. Current Certificate holder(s) (attach additional sheets for other owners, if necessary):

Phone: _____ Fax: _____ E-mail: _____

Address: _____

3. Assignee(s): _____

Phone: _____ Fax: _____ E-mail: _____

Address: _____

4. Contact person for questions regarding this application: _____

Phone: _____ Fax: _____ E-mail: _____

Address: _____

5. Please attach a copy of the Type B Certificate of Assured Water Supply or Certificate of Assured Water Supply issued prior to September 12, 2006. Attachment: _____

6. Please complete the following:

- ☐ For this partial assignment, classify both the assigned and retained Certificates as Type A Certificates.
- ☐ For this partial assignment, classify only one of the Certificates as a Type A Certificate (please provide an explanation): _____
- ☐ Classify this full assignment as a Type A Certificate.

All of the subdivision's estimated water demand will be met with one or more of the following sources of supply for the water provider(s):

- ☐ Groundwater will be served by a proposed municipal provider pursuant to an existing service area right.
- ☐ Groundwater will be served by a proposed municipal provider pursuant to a pending service area right, if the proposed municipal provider holds or will hold the well permit.
- ☐ Central Arizona Project water will be served by a municipal provider pursuant to the municipal provider's non-declining, long-term municipal and industrial subcontract.
- ☐ Surface water will be served by a proposed municipal provider pursuant to the proposed municipal provider's surface water right or claim.
- ☐ Effluent owned and served by a proposed municipal provider.
- ☐ A Type 1 grandfathered right appurtenant to the land on which the groundwater will be used and held by a proposed municipal provider.

Please provide evidence to support any items checked above and reference as an attachment.

Attachment: _____

7. Please attach proof of ownership for each assignee in the form of a title report, condition of title report, limited search title report, or recorded deed, dated within 90 days of the date this application is submitted to the Department. If optionees or buyers will participate in the Assignment process, provide evidence of (a) purchase agreement(s). Reference these documents as attachments. Attachment: _____

8. Please attach a copy of the current plat of the subdivision. Attachment: _____

9. Please use the Subdivision/Development demand calculator provided by the Department to estimate the subdivision's demand. See the Department's website at <http://www.azwater.gov> and click on Permits, Forms and Applications to download a copy of the demand calculator **OR** provide a detailed explanation of the assumptions used in estimating the subdivision's water demand and reference the demand calculator and/or the assumptions used as an attachment. Attachment: _____

NOTE: Acreages used in the demand estimate should correspond to the plat map referenced in question 8 above.

ESTIMATE OF ANNUAL WATER DEMAND: _____ acre-feet per year

10. Please attach evidence that all necessary water rights, permits, licenses, contracts, and easements have been or will be assigned to the assignee of the certificate (reference as attachment): _____

11. If the proposed subdivision is not a dry-lot subdivision a new Notice of Intent to Serve Form may need to be completed as part of this application. To determine whether a new Notice of Intent to Serve Form is required, contact the Office of Assured and Adequate Water Supply. If the Department determines that a new Notice of Intent to Serve Form is required, please attach a completed, signed copy of the form and reference as an attachment. Attachment: _____

Note: A new Notice of Intent to Serve Form will generally be required if the previous form is data prior to September 12, 2006.

12. See A.A.C. R12-15-717 and R12-15-718 for documentation that should be submitted as evidence of continuous availability and legal availability (respectively) for each source of supply listed on the current Certificate. Please reference attachment(s): _____

13. Please complete the table below. To complete the table below, multiply the Total Annual Demand computed in item 9 above by 100 to obtain the 100-year demand and enter at the bottom of the chart. Enter the appropriate 100-year demands for each type of water delivered to the subdivision for each category.

Source of Supply	100 Year Volume (ac-ft)	
	Primary Provider	Secondary Provider
Groundwater		
Central Arizona Project Water: Direct treatment and delivery		
Stored and Recovered water		
Surface Water: Direct treatment and delivery		
Stored and Recovered water		
Effluent: Direct treatment and delivery		
Stored and Recovered water		
Other		
Total 100-yr Volume		

14. Please check one of the following and include attachments as necessary:

- ☐ The final plat will be submitted to a **qualified platting authority**. The Department maintains a list of **qualified platting authorities**. Contact the Office of Assured and Adequate Water Supply for assistance or visit the Department's website at <http://www.azwater.gov> and go to the Permits, Forms and Applications page.

The platting authority is: _____

- ☐ Adequate delivery, storage, and treatment works have been constructed, and water service is available to each lot. Attach a letter from the water provider verifying that all delivery lines are installed and that water service is available to each lot. Attachment: _____

- ☐ A performance bond has been posted with the platting authority for the entire cost of adequate delivery, storage, and treatment works (reference as attachment): _____

I DO HEREBY certify that the information contained in **this application and all information accompanying it is true and correct to the best of my knowledge and belief**. **NOTE:** All owners and buyers, if applicable, must sign (attach additional sheets, if necessary). **NOTE:** You may use the Department's Letter of Authorization for Signature form to give another person the authority to sign this application and related documents on your behalf, or you may submit a letter signed by you and dated within 90 days of the date this application is submitted, authorizing your representative to submit applications for permits regarding the land to be included in this Certificate.

Please print the name and title of the Current Certificate Holder or the Current Certificate Holder's authorized agent (if signator is someone other than the Current Certificate Holder)

Signature of Current Certificate Holder or Current Certificate Holder's Authorized Agent

Date

Please print the name and title of the Assignee or the Assignee's authorized agent (if signator is someone other than the Assignee)

Signature of Assignee or Assignee's Authorized Agent

Date

FEES

1. Please calculate fees by completing the appropriate items below, and include the total fees with your application.

For an Assignment of a certificate that was issued after September 12, 2006 there is no fee.

For an Assignment of a certificate issued prior to September 12, 2006 calculate the fee as indicated below. Payment may be made by cash, check, or credit card (if you wish to pay by credit card, please contact the Assured and Adequate Water Supply Program Coordinator at 602-771-8599). Checks should be made payable to the Department of Water Resources.

Failure to enclose the required fees will cause the application to be returned. Fees for certificates of assured water supply are authorized by A.R.S. § 45-113.

2. For an assignment of a certificate issued prior to September 12, 2006 calculate the fee as indicated below:

a. Basic Application fee (includes first 20 lots) \$ 250.00

b. Per-lot review fee (for lots in excess of the first 20):

Total lots on the current certificate	_____	lots	
Less first 20 lots	_____	-20 lots	
Lots subject to additional review fees	_____	x \$0.50 per lot:	\$ _____

c. Total fee due (item a plus item b) **NOT TO EXCEED \$1,000** \$ _____

DID YOU REMEMBER?

To completely fill out the application form?

To include copies of plat?

To include all documents referenced in the application?

To include correctly calculated fees?

To have application signed by **each applicant** or an authorized agent **for each applicant** and include proof of the authorization?

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OFFICE OF ASSURED WATER SUPPLY
3550 NORTH CENTRAL AVE. 2ND FLOOR
PHOENIX, ARIZONA 85012
(602) 771-8599

NOTICE OF INTENT TO SERVE

Subdivision/Development Name ("Subdivision"): _____

Subdivision Owner ("Owner"): _____

Municipal Provider: _____

If the Municipal Provider has several divisions, please specify service area in which the Subdivision is located

ADEQ Public Water System Number: _____ Please indicate the number valid for this Subdivision

Municipal Provider Type:

____ City or Town;

____ Irrigation District;

____ Water Improvement District;

____ Private Water Company Regulated by the Arizona Corporation Commission ("PWC");

Is the Subdivision within the PWC's existing Certificate of Convenience and Necessity ("CC&N")? ____ Yes ____ No

If "No", has an application for an extension of the CC&N been filed? ____ Yes ____ No

If "Yes" date of submittal: _____

Please include a copy of the application for extension and reference as an attachment.

If the Subdivision is not within the PWC's CC&N, a Certificate of Assured Water Supply will not be issued until the CC&N has been extended to include the Subdivision.

____ Homeowners' Association ("HOA")

If HOA, please provide the documents that establish the HOA and evidence that the Arizona Corporation Commission ("ACC") has adjudicated the HOA "not for public service," and therefore not subject to regulation by the ACC.

COMPLETE THIS SECTION IF SUBDIVISION IS LOCATED WITHIN AN ACTIVE MANAGEMENT AREA:

ADWR Service Area Right Number: 5 - _____ Number can be found on ADWR Annual Reports

Is the Subdivision located within the Municipal Provider's existing operating distribution system? ____ Yes ____ No

If no, will the Municipal Provider be establishing a new service area right to serve the Subdivision? ____ Yes ____ No

If yes, what type of right will be used to establish the service area right? _____

If the Subdivision is not within the Municipal Provider's operating distribution system, the Municipal Provider must begin the process to establish a new or satellite service area right or enter into an agreement with the undersigned Owner to extend water lines to the subdivision before a Certificate of Assured Water Supply will be issued. Please contact your local AMA office for more information on establishing a new service area right.

The undersigned Owner and Municipal Provider certify that: (1) They have entered into an agreement whereby the Municipal Provider agrees to provide the Subdivision sufficient water to satisfy the ____ **potable** ____ **non-potable (please check one)** water demands of the Subdivision; (2) The aforementioned agreement is binding upon the present and future agents, servants, representatives, successors in interest and assigns of the Municipal Provider and the Owner; and (check which of the following applies):

☐ (a) the Subdivision is within 660' of the Municipal Provider's operating distribution system or,

☐ (b) the undersigned Owner and Municipal Provider have entered into an agreement binding upon the present and future agents, servants, representatives, successors in interest and assigns of the Municipal Provider and the Owner to extend water lines to the subdivision, or

☐ (c) a new service area right will be established to serve the Subdivision (if subdivision is located within an active management area). This Notice of Intent to Serve is conditioned upon the Municipal Provider's receipt of necessary approvals from the relevant regulatory agencies and the Municipal Provider's receipt of all necessary payments.

If the Municipal Provider is a PWC, then the Municipal Provider further certifies that the Subdivision is within the boundaries of its CC&N, or that a formal request has been filed with the ACC to extend the boundaries to include the Subdivision.

Print the name of the Authorized Agent of the Water Provider

Signature of Authorized Agent of Water Provider

Title

Date

Print the name of the Owner or the Owner's Authorized Agent

Signature of Owner or the Owner's Authorized Agent

Title

Date

NOTE: If there are multiple owners, you may use the attached signature page.

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PHOENIX, ARIZONA 85012
(602) 771-8599

NOTICE OF INTENT TO SERVE
SIGNATURE PAGE FOR:

Subdivision/Development Name ("Subdivision"): _____

Water Provider Name: _____

Printed Name of Water Provider's Authorized Agent

Signature of Authorized Agent:

Title

Date

Owner Name: _____

Printed Name of Owner or Owner's Authorized Agent

Signature of Owner or Owner's Authorized Agent:

Title

Date

Owner Name: _____

Printed Name of Owner or Owner's Authorized Agent

Signature of Owner or Owner's Authorized Agent:

Title

Date

Owner Name: _____

Printed Name of Owner or Owner's Authorized Agent

Signature of Owner or Owner's Authorized Agent:

Title

Date

This form must be signed by each owner or an authorized agent for each owner. If the signator is someone other than the owner, please provide proof of legal authority to sign on each owner's behalf that is dated within 90 days of the date this application is submitted to the Department.